

GENERAL FACT SHEET

BILL NUMBER 11-53

BRIEF TITLE

APPROVED DEADLINE

REASON

Amending Section of
the Lincoln Municipal Code

DETAILS

POSITIONS/RECOMMENDATIONS

<p>Request for an ordinance to amend Section 2.76.385 of the Lincoln Municipal Code - Funeral Leave.</p> <p>Changes for part-time ^{and} unrepresented employees to coincide with CIR order for 'N' and 'X' range employees. Changes to be retroactively effective August 19, 2010.</p>	Sponsor	Personnel Department
	Program Departments, or Groups Affected	All City Departments
	Applicants/ Proponents	<p>Applicant</p> <p>City Department</p> <p>Other</p>
<p>Discussion (Including Relationship to other Council Actions)</p>	Opponents	<p>Groups or Individuals</p> <p>Basis of Opposition</p>
	Staff Recommendations	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	<p>BY Personnel Board</p> <input checked="" type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

DETAILS

POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input type="checkbox"/> NO <input type="checkbox"/> YES <hr/> <hr/> <hr/>	
	OPERATIONAL IMPACT ASSESSMENT	<hr/> <hr/> <hr/>	
	FINANCES		
	COST AND REVENUE PROJECTIONS	COST of total project: \$ COST of this Ordinance/ Resolution \$	
		RELATED annual operating Costs \$	
		INCREASE REVENUE EXPECTED/YEAR \$	
	SOURCE OF FUNDS	CITY [Approximately] <hr/> \$ _____ % <hr/> \$ _____ % <hr/> \$ _____ % <hr/> \$ _____ % <hr/> \$ _____ %	
NON CITY [Approximately] <hr/> \$ _____ % <hr/> \$ _____ % <hr/> \$ _____ % <hr/> \$ _____ % <hr/> \$ _____ %			
BENEFIT COST			
<input type="checkbox"/> Front Foot Average Assessment			
<input type="checkbox"/> Square Foot \$ _____ \$ _____			

APPLICABLE DATES: May 2, 2011

FACT SHEET PREPARED BY: Mark Koller

REVIEW BY:

REFERENCE NUMBER